



REGISTRY

APPLICATION FOR REGISTRATION ON PROFESSIONAL DEVELOPMENT MODULE

NS5049 – OVERWEIGHT AND OBESITY: SHAPING A HEALTHIER FUTURE

Name:	
Contact address:	
Next of Kin: Name & Contact Number:	
Professional Qualification/Role:	
Professional Registration Number if relevant:	
Telephone numbers (Mobile or Work):	
Email address:	
Date of birth:	
Period of registration at DCU:	2018-2019
Module for which you wish to register:	NS5049: Overweight & Obesity: Shaping a Healthier Future
If a current or past student of DCU, please supply your student ID Number and the degree for which you are/were registered:	

SIGNED: ..... (APPLICANT)  
PLEASE RETURN THIS FORM ALONG WITH A CURRICULUM VITAE AND **ONE** PASSPORT PHOTOGRAPH TO THE ADDRESS BELOW:

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